

**BASIC INFORMATION****DESCRIPTION**

A common, contagious virus (herpes simplex or HSV-1) infection. Cold sores are sometimes confused with impetigo. They usually involve the lips, gums and mouth area, cornea (rare), and genitals (occasionally).

FREQUENT SIGNS AND SYMPTOMS

- Eruptions of very small, painful blisters usually around the mouth, but sometimes on the genitals. The blisters are grouped together and each is surrounded by a red ring. They fill with fluid, then dry up and disappear.
- If the eye is infected: Eye pain and redness, feeling that something is in the eye, sensitivity to light, and tearing.

CAUSES

- Infection with a herpes virus that invades the skin, often remaining for months or years before causing active inflammation. Most persons develop antibodies that control the virus unless risk factors (below) develop.
- The virus is transmitted by person-to-person contact or by contact with saliva, stools, urine or discharge from an infected eye. The blisters and ulcers of herpes simplex are contagious until they heal, both in the first and in succeeding flare-ups.

RISK INCREASES WITH

- Newborns; children who have eczema.
- Physical or emotional stress.
- Illness that has lowered resistance, including a cold, minor gastrointestinal upset or fever from any cause.
- Excess sun exposure.
- Menstrual periods.
- Dental treatment that stretches the mouth.
- Use of immunosuppressive drugs.

PREVENTIVE MEASURES

- Avoid physical contact with others who have active lesions.
- Wash your hands often during a flare-up to avoid spreading the virus.
- Prevent by daily administration of acyclovir.

EXPECTED OUTCOMES

Spontaneous recovery in a few days to a week, occasionally longer. Recurrence is common. The virus remains in the body for life, but it is usually dormant. Research continues in developing a vaccine.

POSSIBLE COMPLICATIONS

- Permanent vision impairment, if herpes eye infections are untreated.
- Severe, widespread infection in patients with eczema.
- Meningitis or encephalitis (rare).

**TREATMENT****GENERAL MEASURES**

- The appearance of the typical lesion is usually diagnostic, however, a laboratory study may be done of fluid from the sore for confirmation.
- Drink cool liquids or suck frozen juice bars to reduce discomfort.
- Apply an ice cube for 1 hour during the first 24 hours after a lesion appears. This may make it heal more quickly.
- Don't rub or scratch an infected eye.
- To prevent flare-ups, use zinc oxide or sun-screen preparations on your lips when you spend much time outdoors.

MEDICATIONS

- Use acetaminophen to relieve minor pain. Don't use aspirin, especially for children and adolescents. The use of aspirin during some viral illnesses may lead to Reye's syndrome, a form of encephalitis.
- Don't try to treat an infected eye, especially with cortisone ointments or drops. Cortisone preparations promote growth of the herpes virus in the cornea.
- Antiviral topical or oral medication, antibiotic ointment if lesions become infected with bacteria may be prescribed.
- Continuous use of oral medication may be recommended to prevent frequent episodes.

ACTIVITY

- No restrictions, except to avoid close contact, especially kissing or oral sex, until lesions heal.
- Avoid contact with newborns or patients who are taking immunosuppressant drugs (they are more susceptible to infection).

DIET

No special diet.

**NOTIFY OUR OFFICE IF**

The following occur with a cold sore:

- Signs of secondary bacterial infection, such as fever, pus instead of clear fluid in the lesions, headache and muscle aches.
- Eruption of lesions on the genitals similar to those around the mouth.
- New, unexplained symptoms. Drugs used in treatment may produce side effects.